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ARB: What have we known and what have we missed?

The introduction of angiotensin receptor antagonists gave the hypertension world a class of drug which is remarkably efficient at lowering blood pressure with a very low incidence of unacceptable side affects. The outcome trials in mild to moderate hypertension and also in protecting the kidney have all been very positive and these agents are now in the vanguard of treatment programs worldwide. There is still an ongoing debate as to whether these agents have pressure independent advantages, although the most recent meta-analyses suggest that the answer to this question is probably negative. It is the effectiveness in blood pressure control that is of paramount importance. Most recently, the role of angiotensin receptor blockers in preventing or reversing sub-clinical target organ damage has been studied and notable benefits in renal protection and left ventricular hypertrophy regression have been highlighted. Some experimental data suggest that there are antioxidant effects which may also be beneficial in terms of atheroma progression and prevention. Other evidence suggests that the drugs may be useful in preventing the development of diabetes and the on-set of persistent atrial fibrillation, although some of these data are still controversial.

Angiotensin receptor blockers are here to stay. They provide us with an additional powerful class of drug useful in the management of hypertension. Their use in fixed combinations is also going to be exciting and beneficial.